## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10617879

|   |  | Eneci   | <u>_</u> _L_   |                                      |                              |                  |   |                     |                        |    |                        |                        |
|---|--|---|----------------|--------------------------------------|------------------------------|------------------|---|---------------------|------------------------|----|------------------------|------------------------|
| CLAIMS A  |  |   | (Column 1)     |                                      | (Column 2)                   |                  |   | SMALLE<br>TYPE [    | NTITY                  | OR | OTHER<br>SMALL         |                        |
| TOTAL CLAIMS  |  |   | 36             |                                      |                              |                  |   | RATE                | FEE                    |    | RATE                   | FEE                    |
| FOR   |  |   | NUMBER FILED   |                                      | NUMBER EXTRA                 |                  |   | BASIC FEE           | 385.00                 | OR | BASIC FEE              | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 36 minus 20=   |                                      | . 16                         |                  |   | X\$ 9=              | 144                    | OR | X\$18=                 |                        |
| INDEPENDENT CLAIMS  |  |   | 2 minus 3 =    |                                      | , à                          |                  |   | X43=                |                        | OR | X86=                   |                        |
| MU  | LTIPLE DEPEN                                   | DENT CLAIM PF   | ESENT          |                                      |                              |                  |   | +145=               |                        | OR | +290=                  |                        |
| * If the difference in column 1 is less than zero, enter                              |  |   |                |                                      |                              | xolumn 2         | ١ | TOTAL.              | 529                    | OR | TOTAL                  |                        |
| j/  | - 16 OF  | LAIMS AS A<br>(Column 1)  | MENDED         | ) - PART II<br>(Column 2) (Column 3) |                              |                  | _ | SMALL               | ENTITY                 | OR | OTHER<br>SMALL I       | 1                      |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                | HIGH<br>NUM<br>PREVIO<br>PAID        | BER<br>DUSLY                 | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 28  | Minus          | - 3                                  | 6                            | <b>B</b>         |   | X\$ 9=              |                        | OR | X\$18=                 |                        |
|   | independent                                    | * /   | Minus          | ***                                  | 3                            | 10/              |   | X43=                |                        | OR | X86=                   |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                |                                      |                              |                  |   | +145=               |                        | OR | +290=                  |                        |
|   |  |   |                |                                      |                              |                  |   | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE    |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                |                                      |                              |                  |   |                     |                        |    |                        |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                | NUM<br>PREVI                         |                              | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus          | **                                   |                              | =                | ┨ | X\$ 9=              |                        | OR | X\$18=                 |                        |
|   | Independent                                    | *   | Minus          | ***                                  | CI AIM                       | =                | - | X43=                |                        | OR | X86=                   |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                |                                      |                              |                  |   | +145=               |                        | OR | +290=                  |                        |
|   |  |   |                |                                      |                              |                  |   | TOTAL<br>ADDIT. FEE | •                      | OR | TOTAL ADDIT. FEE       |                        |
| (Column 1) (Column 2) (Column 3)  |  |   |                |                                      |                              |                  |   |                     |                        |    |                        |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                       |                | NUM<br>PREVI                         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                   | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus          | **                                   |                              | =                |   | X\$ 9=              |                        | OR | X\$18=                 |                        |
|   | Independent                                    | *   | Minus          | ***                                  | T 61 616                     | ]=               | 4 | X43=                |                        | OR | X86=                   |                        |
| Ļ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                                      |                              |                  |   | +145=               |                        | OR |                        |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |                |                                      |                              |                  |   |                     |                        | OR | TOTAL                  |                        |
| ***   | If the "Highest Nu                             | mber Previously Pa<br>mber Previously Pa<br>hber Previously Pai | aid For IN THI | S SPACE                              | is less that                 | an 3, enter "3." |   | ADDIT. FEE          |                        | 8. | ADDIT. FEE<br>olumn 1. |                        |